

|   |  |                         |   |
|---|--|-------------------------|---|
| <b>Index of Claims</b>  |  | Application/Control No. | Applicant(s)/Patent Under Reexamination |
|  |  | 10585127                | LINDER, STEN                            |
| Examiner  |  | Art Unit                |   |
| JAY M PATIDAR   |  | 2862                    |   |

|   |          |   |            |   |              |   |          |
|---|----------|---|------------|---|--------------|---|----------|
| ✓ | Rejected | - | Cancelled  | N | Non-Elected  | A | Appeal   |
| = | Allowed  | ÷ | Restricted | I | Interference | O | Objected |

Claims renumbered in the same order as presented by applicant  CPA  T.D.  R.1.47

| CLAIM |          | DATE       |            |  |  |  |  |  |  |  |  |
|-------|----------|------------|------------|--|--|--|--|--|--|--|--|
| Final | Original | 03/29/2009 | 11/15/2009 |  |  |  |  |  |  |  |  |
| 1     | 1        | =          | =          |  |  |  |  |  |  |  |  |
| 2     | 2        | =          | =          |  |  |  |  |  |  |  |  |
| 3     | 3        | =          | =          |  |  |  |  |  |  |  |  |
| 4     | 4        | =          | =          |  |  |  |  |  |  |  |  |
| 5     | 5        | =          | =          |  |  |  |  |  |  |  |  |
| 6     | 6        | =          | =          |  |  |  |  |  |  |  |  |
| 7     | 7        | =          | =          |  |  |  |  |  |  |  |  |
| 8     | 8        | =          | =          |  |  |  |  |  |  |  |  |
| 9     | 9        | =          | =          |  |  |  |  |  |  |  |  |
| 11    | 10       | =          | =          |  |  |  |  |  |  |  |  |
| 12    | 11       | =          | =          |  |  |  |  |  |  |  |  |
| 13    | 12       | =          | =          |  |  |  |  |  |  |  |  |
| 14    | 13       | =          | =          |  |  |  |  |  |  |  |  |
| 16    | 14       | =          | =          |  |  |  |  |  |  |  |  |
|       | 15       | -          | -          |  |  |  |  |  |  |  |  |
| 17    | 16       | =          | =          |  |  |  |  |  |  |  |  |
|       | 17       | =          | -          |  |  |  |  |  |  |  |  |
| 10    | 18       | =          | =          |  |  |  |  |  |  |  |  |
| 15    | 19       | =          | =          |  |  |  |  |  |  |  |  |